

Kinship Care – A Program Evaluation

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The purpose of this study is to evaluate the effectiveness of the Kinship Care program on the basis of permanence and safety in the placement. More specifically, as compared to children in Foster Care, do children in Kinship Care achieve permanence as quickly and effectively and are they as safe in their placements?

This study used a pre-experimental static group comparison design with the sample drawn from the population of children who had been removed from their parents and placed with Kinship Care providers in Jefferson County. This group was then compared to a group of children who entered foster care in the same time period based on the reason for removal, gender, race and age of the child. These groups were not statistically different in these areas.

The safety variable was measured by the number of substantiated reports and the permanence variable was measured by whether or not permanence was documented, the number of placement moves experienced and the length of time prior to achieving permanence.

From the results, it can be concluded that children in Kinship Care experience similar rates of substantiated abuse/neglect reports and achieve permanency at similar rates. Children in Kinship Care have significantly fewer placement moves prior to achieving permanency, but take significantly longer to achieve permanence.

The purpose of the qualitative study was to determine the process that Cabinet social workers follow in determining whether to refer a family for Kinship Care or Foster Care, and to examine the social workers' perceptions of the strengths and weaknesses of each type of placement resource. This study utilized a formative program evaluation that included a descriptive account of the worker's decision-making process and a content analysis of the workers' perceptions of the strengths and weaknesses of each program. The sample included 9 workers from a variety of teams in the Jefferson County office, each of whom has made at least five Kinship Care referrals.

The results indicated that workers unanimously look for relative resources first before deciding to place a child in foster care. Workers described many strengths of Kinship Care, including continuing the familial bond and the fact that it is less work for the worker. Weaknesses included some concern regarding safety issues that are present in the family of origin as well as the perceived lack of follow through with obtaining permanence. Workers struggled with finding strengths in the foster care program but did discuss the fact that foster care is a good "fall back" option and can be helpful with children with challenging behaviors. Weaknesses in the foster care system are the lack of accountability and the perception that some foster parents are only in it for the money.

Overall, Kinship Care is perceived as the first and best choice if children cannot remain with their natural parents and foster care is seen as the last resort.

In the current budget shortfall, state government is looking for ways to save money and yet not cut back on critical services. This research indicates that Kinship Care is as effective as Foster Care at achieving permanence and safety, but costs less. Given this information, current policies should reflect the importance of financially supporting relatives to care for their minor kin. Relative care is less intrusive and empowers families to a greater degree than foster care with its emphasis on professionals as the decision – makers. Further research should examine what services are available to maintain and support placements with particularly challenging children. In addition, further research that has a longitudinal component and a larger sample would be beneficial.

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Kinship Care

- Started in Kentucky in Oct. 1999
- Designed to keep children with family and not in foster care
- Provides financial incentive for relatives to accept custody of minor kin
- Relative placement resources must agree to pursue permanent custody if reunification fails



Quantitative Research Questions

- How does placement program affect the number of substantiated reports of abuse/neglect?
- How does placement program affect the rate at which permanence is achieved?

As compared to children in Foster Care....

- Do children in Kinship Care have fewer placement moves?
- Do children in Kinship Care experience similar lengths of stay prior to achieving permanency?



Research Design and Variables



- Summative program evaluation using a pre-experimental design with a static group comparison method
- Secondary data collected from chart file review for the 50 children in each group
- Safety variable: Measured by the number of abuse/neglect reports and the number of substantiated reports
- Permanency variable: Measured by the presence of a permanency order, number of placement moves, and length of time in care prior to achieving permanency

Sampling Strategy

- A convenience sample was taken from the Kinship Care data base kept by the Kinship Care coordinator from the first three months of the program (Oct. - Dec., 1999).
- Children were selected by using the first 50 children in the database as it was listed (based on an ascending alphabetical sort of relative caregivers' last names).
- In families with more than 1 child referred, the oldest child's data was used.



Group Comparison

Variable	Foster Care n = 50	Kinship Care n = 50	p
Age	7.29	7.74	.675
Gender	.50	.58	.427
Race	.49	.47	.839
Removal Reason	.14	.14	1.00

The foster care group was matched as closely as possible to the Kinship Care group using the variables of race, gender, age, and reason for removal. There were no statistical differences between the two groups.



Results

Research Questions 1 & 2

How does placement program affect the number of substantiated reports of abuse/neglect?



An independent samples t - test yielded no significant difference between the two groups in regards to the number of substantiated reports [$t(98) = -.598$, $p = .55$]. Children in Kinship Care ($m = .08$) appear to experience similar rates of substantiated abuse/neglect reports as children in foster care ($m = .12$).

How does placement program affect the rate at which permanence is achieved?



A Chi-square test of independence was calculated comparing the placement program with the achievement of permanency. No significant difference ($\chi^2 (1) = 2.29$, $p = .13$) was found in the achievement of permanency between children in Kinship Care ($n = 31$) and children in Foster Care ($n = 38$).

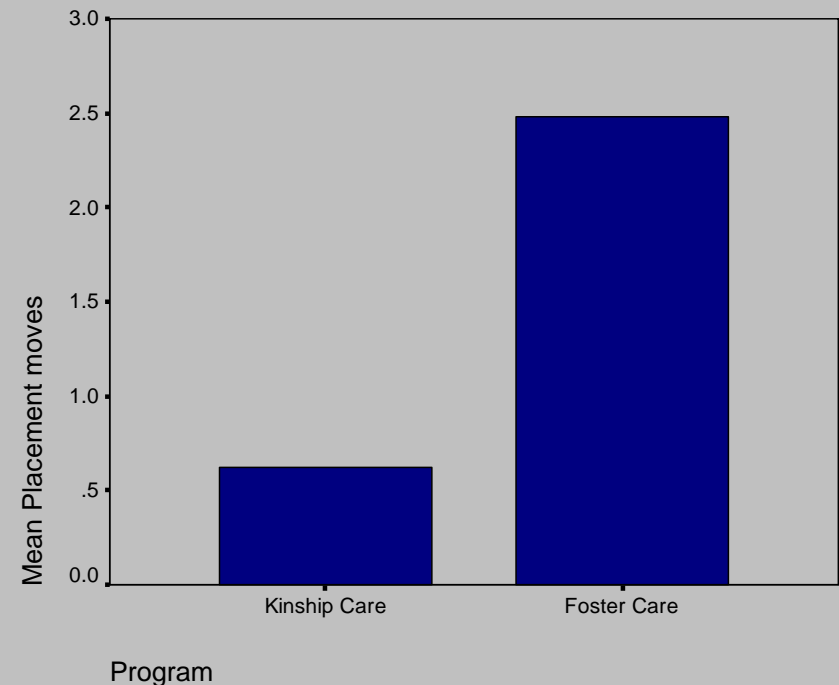


Research Question 3

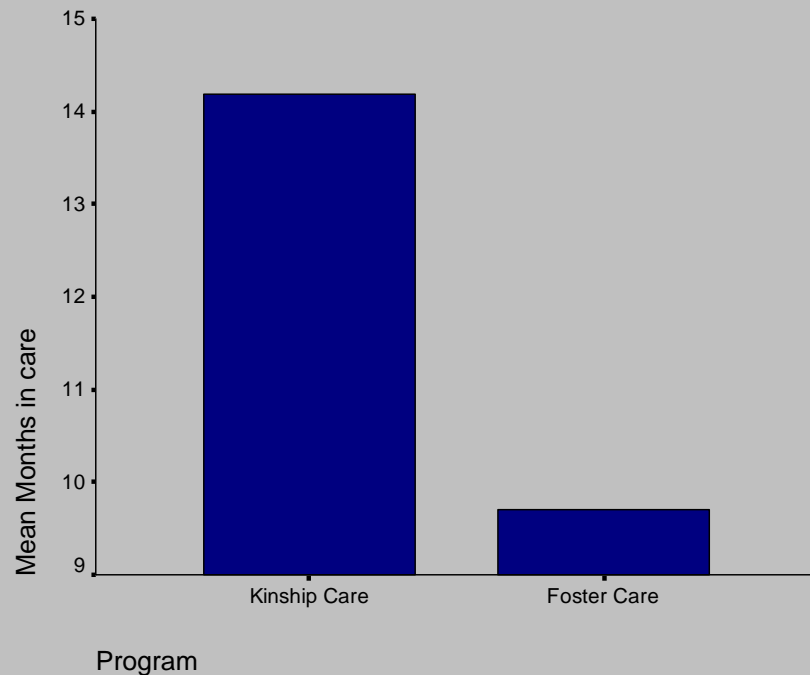
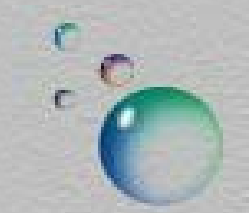
As compared to children in foster care, do children in Kinship Care have fewer placement moves?



An independent samples t - test yielded a significant difference [$t(98) = -5.33, p < .001$] between the number of placement moves for children in Kinship Care ($m = .62$) and children in Foster Care ($m = 2.48$).



Research Question 4



As compared to children in foster care, do children in Kinship Care experience similar lengths of stay prior to achieving permanency?



An independent samples t - test yielded a significant difference [$t(67) = 2.11, p < .05$] between the number of months in care prior to achieving permanency for children in Kinship Care ($m = 14.19$) and children in Foster Care ($m = 9.70$).

Discussion

There is no significant difference between Kinship Care and Foster Care in the number of substantiated reports of abuse/neglect.

There is no significant difference in the rates at which permanency is achieved between the two groups. (One difference, which warrants further research, is that of the 19 Kinship Care children who have not achieved permanency, all but 2 of those cases are closed, indicating that DCBS is no longer working towards permanence. In the Foster Care group, all but one is still open, indicating that DCBS is still working towards permanence.)

Children in Kinship Care have significantly fewer placement moves. (Relatives appear more motivated to maintain children with behavior problems due to the existing bond.

Children in Foster Care reach permanency more quickly than children in Kinship Care. (This may be due to the Cabinet having legal custody of foster children, which may provide a higher degree of motivation to achieve permanence)



Qualitative Study

Research Questions

- What is the process by which workers determine the program to which families and children are referred?
- What are the strengths and weaknesses of the Kinship Care program as perceived by workers?
- What are the strengths and weaknesses of the Foster Care program as perceived by workers?



Qualitative Study

Design, Sample and Data Analysis



The research design used was a narrative descriptive approach using semi-structured interviews of caseworkers, each of whom has made at least 5 referrals to Kinship Care.



An availability sample containing 9 workers from both the Investigative and On-going units was used. These workers have cases with both an Adolescent focus and a younger child focus.

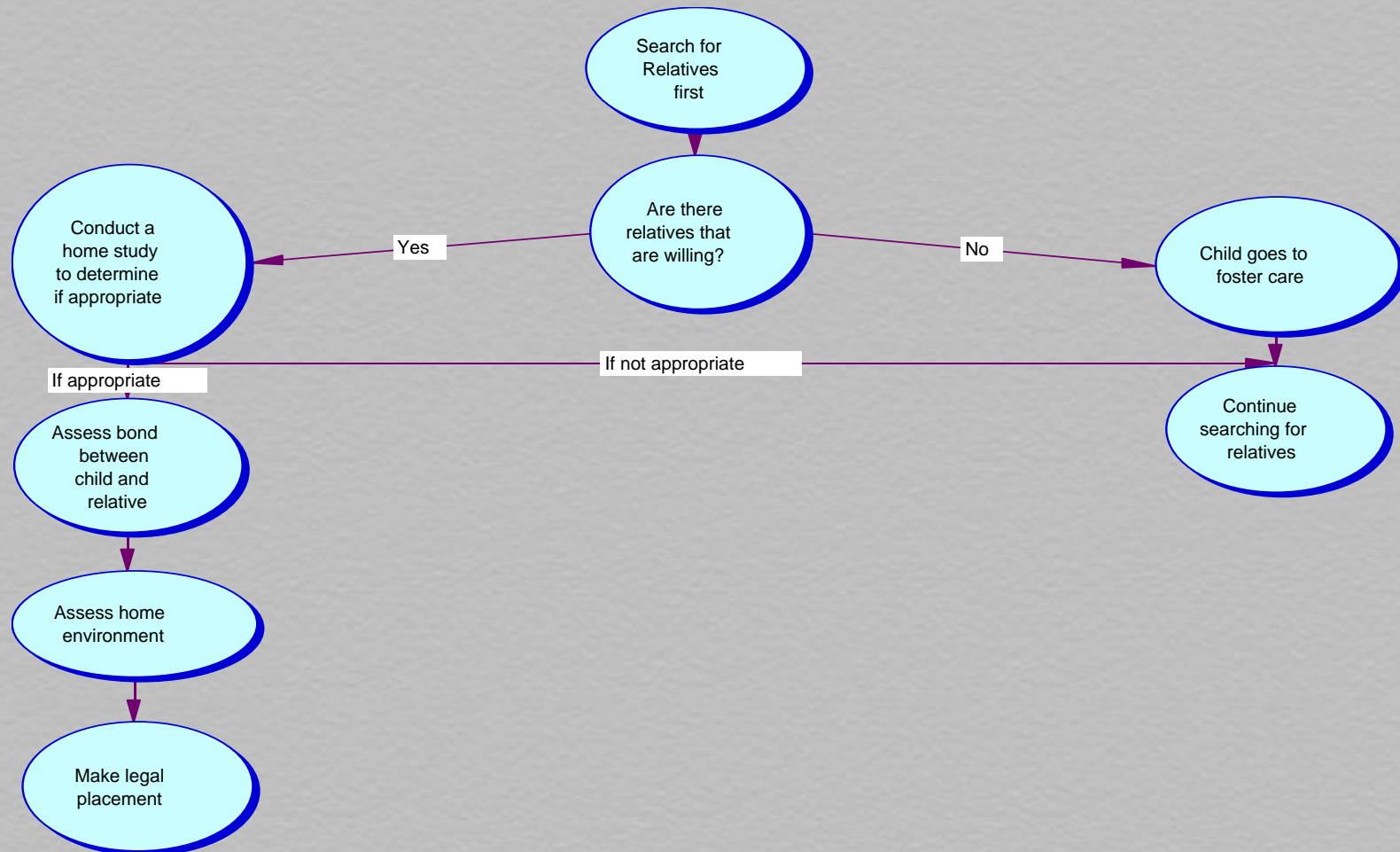


Workers interviewed have a mean length of employment of 8.6 years ($SD = 9.08$), with a minimum of 1.75 and a maximum of 32 years, and have referred an average of 18 families to Kinship Care ($SD = 14.06$), with a minimum of 6 and a maximum of 50.



Data analysis consisted of assembling, organizing, classifying, and editing the raw data, to produce a logical summary of the responses to the interview

Process Used to Determine Kinship Care or Foster Care



Strengths & Weaknesses of Kinship Care

Strengths

- “Always better to have kids with family!”
- “Good to provide financial reimbursement”
- “Less work for the worker and agency”

Weaknesses

- “Slow to be approved and get a check”
- “Permanency isn’t always achieved”
- “Workers worry about safety issues in the family”



Strengths and Weaknesses of Foster Care

Strengths

- “Good to have in an emergency”
- “Some foster parents can really help with challenging children”



Weaknesses

- “Foster parents aren’t held accountable”
- “Some foster parents are only in it for the money”
- “Some foster parents live like the families from which children are removed”



Discussion



Workers perceive Kinship Care as the most preferred option with foster care utilized as a last resort.







According to workers, Kinship Care is better for the child and is less work for the social worker.



Workers see very few strengths in the foster care system, but do acknowledge that individual foster parents are very capable and that it is necessary to have as an emergency fallback.

Conclusions

-  Kinship Care is a viable placement option in terms of safety and permanence.
-  Workers view Kinship Care as the preferred alternative to foster care.
-  Future research should include a larger sample that ranges across the entire state, not just one county.
-  Workers should begin focusing on reducing the amount of time prior to achieving permanence for children in Kinship Care.

